

Commonwealth of Massachusetts Department of Public Safety APPEAL OF CIVIL FINE FOR EXPIRED ELEVATOR CERTIFICATES (pursuant to 520 CMR 16.03)

Please send appeal form to:

Department of Public Safety, Civil Fine Enforcement Program Coordinator, 1 Ashburton Place, Room 1301, Boston, MA 02108

Name: (First)		(Last)		(Middle)	
Address: (Street)	(Apt.)	(City)	(State)	(Zip Code)	
Telephone number:		Email address:			
Date of Violation:		*Elevator Ta	g#:		
_	* You m	ust submit a separate	e appeal form per elev	vator.	
Willfulness of the viola ☐ Previous violations res ☐ Clerical errors ☐ Inaccurate assessment ☐ Lack of prior use ☐ De minimis risk of inju By checking any of the of my reason(s) for a	ilure to provide solution ulting in the important to the publication above boxes, in the publication of the	such documentation reposition of administ	nay result in the appearative penalties	t your appeal. Please include a all being returned. etailed documentation in support	
 <u>perjury</u> from me or n Severe financial hards institution 	ny representative hip – elevator o	e asserting that payme wned by corporate e	ent of the fine will cau ntity, organization, 1	der the pains and penalties of use severe financial hardship. municipality, or religious	
and liabilities greate or my representative ☐ Other – a reason for ap	r than \$1,000; a asserting that po peal other than	nd (c) a statement <u>sw</u> ayment of the fine wil those factors listed i i	orn to under the pain. l cause severe financi	supported by documentation.	
		orize		to act as my	
epresentative at my appeal h	•		Data		
* Appeal forms	not signed by o	wner of record are co	Date: nsidered incomplete o	and will be returned.	

TO FILE AN APPEAL, YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

1. You MUST complete this appeal form in its entirety.

Be advised that incomplete forms will be returned to you. The return of an appeal form for lack of completeness, lack of documentation, or lack of signature by owner of record will not be grounds for extension of the 30 day filing requirement.

2. A \$100 filing fee <u>MUST</u> accompany all appeals and payment <u>MUST</u> be made in the form of a check or money order made out to the Department of Public Safety.

Cash will not be accepted.

3. Your completed appeal form and \$100 appeal filing fee MUST be mailed to:

Department of Public Safety Civil Fine Enforcement Program Coordinator One Ashburton Place, Room 1301 Boston, MA 02108

Your appeal <u>MUST</u> be received by the Department <u>within 30 days</u> of receipt of the notice of violation.

Payment of all fines is due within 30 days of receipt of the notice of violation. Failure to file an appeal within that time period will result in a waiver of such right and all fines set forth in said notice shall be imposed. Failure to pay or appeal any violation within that time period may also result in prohibition from renewal of any license held by the alleged violator, prohibition from sitting for any examination required to renew a license until payment is received, elevator shut down, and/or any and all other remedies available to the Department.

For more information, please review the Civil Fines for Expired Elevator Certificates FAQs on the Department of Public Safety website, available at:

http://www.mass.gov/eopss/consumer-prot-and-bus-lic/license-type/civil-fines/civil-fine-faqs-elevator-expired-certificates.html